



Graduate School

NAME: _____ ID# _____

Admitted students are required to file this form in the Graduate School no later than the completion of their first 9 semester hours. Complete, route for signatures, and deliver or email the completed form to: graduate@minotstateu.edu.

REQUIRED COURSES	SH	PROJECTED SEMESTER (YR)			Grade
		Fall	Spring	Summer	
ED 540 Reading: Advanced Diagnosis & Remediation	2				
Ed 541 Clinical Practice Remedial Reading	2				
SPED 561 Behavior Problems of Exceptional Children	3				
SPED 572 Methods of Teaching the Learning Disabled	3				
PSY 503 Statistics I	3				
PSY 511 Human Growth and Development	3				
PSY 512 Research Design & Measurement	4				
PSY 514 Individual Cognitive Assessment	4				
PSY 515 Academic Assessment	4				
PSY 518 Psychopathology for Children	3				
PSY 525 Role and Function of the Sch. Psychologist	3				
PSY 533 Social and Behavioral Interventions in Sch.	3				
PSY 584 School Psychology Practicum I	3				
PSY 585 School Psychology Practicum II	3				
PSY 586 Clinical Experience	3				
PSY 590 Counseling Skills	3				
PSY 592 Special Topics-Diversity in the Schools	3				
PSY 593 School Safety, Crisis Prep., & Crisis Response	3				
PSY 594 Consultation and Collaboration	3				
PSY 598 Internship	6				
PSY 599 Internship	6				
	REQUIRED CREDITS	70			
PSY 597 Thesis (optional track)	3				

SIGNATURES:

Student: _____ ID# _____ Date: _____

Program Director: _____ Date: _____

Department Chairperson: _____ Date: _____

*Maximum 7 year time limit to complete degree. Outside transfer credit must be approved with Program Director. See catalog policies for TIME REQUIREMENT & TRANSFER CREDIT.

*Course Deviations requires the Program Director to submit a "Course Substitution" form to the Registrar's office.

*Any changes to original plan requires an updated Program of Study to the Graduate School.